

**MENTALLY ILL OFFENDER
GRANT**

**COMMON DATA ELEMENT
DICTIONARY:**

**INTAKE,
BACKGROUND,
PROGRAM PARTICIPATION
VARIABLES**

8/2/00

Orientation to the Data Dictionary

In response to language contained in the authorizing legislation (SB 1485), research staff of the Board of Corrections are developing a state-wide evaluation program to assess the effectiveness of the Mentally Ill Offender Crime Reduction Program Grants. The design of the evaluation requires that common data be collected on participants in both the treatment and comparison groups and that the data be reported to the BOC on a regular basis. BOC staff will prepare annual reports to the legislature as well as a final evaluation report after the funding terminates.

History: Staff from the Board of Corrections met with Mentally Ill Offender project directors and researchers in Ontario, California in October, 1999. A list of proposed common data elements was presented to the group, discussed, and modified. It was agreed that the Board of Corrections staff would incorporate modifications suggested by the group and distribute a revised draft to the field upon returning to Sacramento. It was also agreed that the BOC staff would complete the Intake and Background Data Elements first to accommodate counties ready to start their programs.

A second draft of common data elements (Intake and Background) was distributed to the field and comments solicited. Feedback from researchers *alerted us to three databases that were, or would soon be, used by county mental health departments to report client characteristics, services provided, and program effectiveness information to the California Department of Mental Health. Upon examination, we found these databases contained many data elements that would be useful for the MIOCRG state-wide evaluation and that their use by local MIOCRG project staff, given appropriate confidentiality provisions, would substantially reduce the data collection burden. The present document incorporates some data elements from those state-wide mental health databases as well as some that are specific to the MIOCRG project. This is not to suggest that the BOC staff would have access to these databases, rather that the individual data elements, with participant confidentiality protected, would be forwarded to the BOC for use in the state-wide evaluation.*

To understand the juncture between the state-wide mental health databases and the MIOCRG projects, the following is a brief description of each:

These databases are the Medi-Cal Billing system, the Client and Service Information database, and the Performance Outcomes database. The first database has been in use for some time and equates mental health services with particular billing codes in the Medi-Cal system. The last two databases were developed by the California Department of Mental Health to improve client service reporting by the county mental health departments to the state agency. Since the counties are required to use the CSI and the Performance Outcomes reporting systems, and the counties are already using the Medi-Cal billing system, it seemed reasonable to change the Mentally Ill Offender data elements to conform as much as possible to the existing database data fields. The attached dictionary reflects those changes.

Database Structure

The MIO common data elements database is a flat SPSS file. The columns have been designated as variables (with variable names) and, when possible, value labels have been designated. Each case should be entered as a longitudinal record, one client per row. The database is being developed in three parts – 1) Intake, Background, and Participation Data, 2) Interventions Data

(e.g., services received), and 3) Outcome Data. This document contains only the Intake, Background, and Participation Data information.

The Intake, Background, and Participation Data is organized into six sections. The variable names begin with the section identifier:

ID	Identification Data
PI	Participant Identification
MH	Mental Health Status
CJ	Criminal Justice History and Status
CR	Client's Resources
PP	Program Participation

When an MIO data element originates from another instrument, the source is identified. Elements in this document have been drawn from the CSI, the California QOL, the Lehman QOL, BASIS 32, and the ASI.

Default Codes

For consistency, please use these conventions for all data elements .

- 0 use only when the correct response is the number zero. CSI items that use 0 to represent not applicable need to be recoded to "x."
- x use when the data element is not applicable to the particular project or client (e.g., use this code for the post-custody interventions field for programs that offer interventions only in the jail).
- *1/1/11 *use in the date fields when the data element is not applicable to the particular project or client*
- y use when the client is unable to respond to question.
- z use when the expected information is missing.

Do not leave any fields empty or blank.

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I. VARIABLES FOR IDENTIFYING THE RESEARCH SUBJECTS

ID_1 UNIQUE SUBJECT IDENTIFICATION NUMBER

Source: BOC
Type: Character
Field Length: XXXX

VALID CODES:

ID numbers start with 0001 and continue through 9999 as necessary

COMMENTS:

Identification numbers are to be assigned each participant, treatment and comparison, by program staff.

ID_2 RESEARCH GROUP

Source: BOC
Type: Character
Field Length: X

VALID CODES:

1	=	Treatment
2	=	Comparison

ID_3 COUNTY NUMBER

Source: BOC
Type: Character
Field Length: XXX

VALID CODES:

Use county codes provided by the Board of Corrections.

ID_4 PROGRAM NUMBER

Source: BOC
Type: Character
Field Length: X

VALID CODES:

1	=	First program for the county
2	=	Second program for the county
3	=	Third program for the county

II. PROGRAM PARTICIPANT IDENTIFICATION AND BASIC INFORMATION

**These questions apply to the clients' situation prior to the qualifying arrest and/or incarceration.*

PI_1a to PI_1c concern birthdate. For the Mentally Ill Offender database, please enter year, month, and day information into three separate fields as identified below. Birthdate can be found in the CSI instrument as C-03.0.

PI_1a YEAR OF BIRTH

Source: BOC
Type: Character
Field Length: XXXX

VALID CODES:

Enter the 4-digit number of the client's birth year.

COMMENTS:

At a minimum, an approximate year of birth must be reported. When month or day are not available, code the field as "unknown."

PI_1b MONTH OF BIRTH

Source: BOC
Type: Character
Field Length: XX

VALID CODES:

Enter a 2-digit number of the client's birth month.

PI_1c DAY OF BIRTH

Source: BOC
Type: Character
Field Length: XX

VALID CODES:

Enter a 2-digit number of the client's day of birth.

PI_2 GENDER

Source: CSI: C-05.0
Type: Character
Field Length: X

VALID CODES:

F = Female
M = Male
O = Other - Includes gender changes, undetermined gender and persons with congenital abnormalities which obscure gender identification.

ETHNICITY/RACE IDENTITY. For the MIO database, ethnicity/race identity is reported in two fields, **PI_3a** and **PI_3b**. The CSI field, which contains the two subfields (A and B), is **C-06.0**

PI_3a PRIMARY ETHNICITY/RACE IDENTITY

Source: CSI: C-06.0 (A)
 Type: Character
 Field Length: X

COMMENTS:

In this field, enter the code below that corresponds to that in the first subfield (A) of C-06.0. Please note that “Multiple” can only be used in PI-3b.

PI_3b SECONDARY ETHNICITY/RACE IDENTITY

Source: C-06.0 (B)
 Type: Character
 Field Length: X

COMMENTS:

In this field, enter the code that corresponds to that in the second subfield (B) of C-06.0

Use the following to code elements PI_3a and PI_3b.

VALID CODES:

1 = White	N = Asian Indian
2 = Hispanic	P = Hawaiian Native
3 = Black	R = Guamanian
5 = American Native	T = Laotian
7 = Filipino	V = Vietnamese
A = Amerasian	X = Multiple (only valid in subfield B)
C = Chinese	4 = Other Asian or Pacific Islander
H = Cambodian	8 = Other
J = Japanese	
K = Korean	
M = Samoan	

For your convenience, below are the ethnic/race groups displayed in alphabetical order

A = Amerasian	K = Korean
5 = American Native	T = Laotian
N = Asian Indian	X = Multiple (only valid in subfield B)
3 = Black	8 = Other
H = Cambodian	4 = Other Asian or Pacific Islander
C = Chinese	M = Samoan
7 = Filipino	V = Vietnamese
R = Guamanian	1 = White
P = Hawaiian Native	
2 = Hispanic	
J = Japanese	

PI_4 PRIMARY LANGUAGE

Source: CSI: C-07.0
Type: Character
Field Length: X

VALID CODES:

0	=	American Sign Language (ASL)	H	=	Hmong
1	=	Spanish	I	=	Lao
2	=	Cantonese	J	=	Turkish
3	=	Japanese	K	=	Hebrew
4	=	Korean	L	=	French
5	=	Tagalog	M	=	Polish
6	=	Other Non-English	N	=	Russian
7	=	English	P	=	Portuguese
A	=	Other Sign Language	Q	=	Italian
B	=	Mandarin	R	=	Arabic
C	=	Other Chinese Languages	S	=	Samoan
D	=	Cambodian	T	=	Thai
E	=	Armenian	U	=	Farsi
F	=	Ilacano	V	=	Vietnamese
G	=	Mien	Z	=	Unknown / Not Reported

For your convenience, below are the Primary languages displayed in alphabetical order.

0	=	American Sign Language (ASL)	B	=	Mandarin
R	=	Arabic	G	=	Mien
E	=	Armenian	C	=	Other Chinese Languages
D	=	Cambodian	6	=	Other Non-English
2	=	Cantonese	A	=	Other Sign Language
7	=	English	M	=	Polish
U	=	Farsi	P	=	Portuguese
L	=	French	N	=	Russian
K	=	Hebrew	S	=	Samoan
H	=	Hmong	1	=	Spanish
F	=	Ilacano	5	=	Tagalog
Q	=	Italian	T	=	Thai
3	=	Japanese	J	=	Turkish
4	=	Korean	Z	=	Unknown / Not Reported
I	=	Lao	V	=	Vietnamese

PI_5 MARITAL STATUS

Source: ASI (Family and Social Relationships, Item 1)
Type: Character
Field Length: X

VALID CODES:

M	=	married
R	=	remarried
W	=	widowed
S	=	separated
D	=	divorced
N	=	never married

***PI_6 DEPENDENT CHILDREN**

Are there minor children (under 18 years old) who need you to provide them with shelter and food today? (doesn't matter whether client has a legal obligation to support children or not – refers only to clients' current responsibility to provide basic care to children)

Source: BOC
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

PI_7 NUMBER OF CHILDREN DEPENDENT ON CLIENT

Identifies how many children depend on client for regular care, including food and housing

Source: BOC
Type: Character
Field Length: XX

VALID CODES:

Enter the number as a two digit number. If the client identifies between 0 and 9 children, enter a 0 before the number (e.g., 09).

PI_8 EDUCATION

The highest grade level completed by the client.

Source: CSI: P-02.0
Type: Character
Field Length: XX

VALID CODES:

00 = None, Kindergarten
01 = Grade levels – Indicate highest grade completed. If the highest grade completed is greater than 20, code 20 as the highest grade completed.
through
20 Code 12 for GED.
98 = Other – Includes vocational education and training.

***PI_9 EMPLOYMENT STATUS (continued on the next page)**

Identifies the current employment status of the client.

Source: CSI: P-03.0
Type: Character
Field Length: X

VALID CODES:

Employed in competitive job market
A = Full time, 35 hours or more per week
B = Part time, less than 35 hours per week

Employed in noncompetitive job market (sheltered workshop, protected environment)
C = Full time, 35 hours or more per week
D = Part time, less than 35 hours per week

Not in the paid work force

E	=	Actively looking for work
F	=	Homemaker
G	=	Student
H	=	Volunteer Worker
I	=	Retired
J	=	Resident / inmate of institution
K	=	Other (<i>use for clients on SSI</i>)
U	=	<i>Unemployed</i>

PI_10 LIVING ARRANGEMENT

Identifies the living arrangement of the client.

Source: CSI: P-09.0
 Type: Character
 Field Length: X

VALID CODES:

A	=	House or apartment (includes trailers, hotels, dorms, barracks, etc.)
B	=	House or apartment and requiring some support with daily living activities
C	=	House or apartment and requiring daily support and supervision)
D	=	Supported housing
E	=	Foster family home
F	=	Group Home
G	=	Residential Treatment Center
H	=	Community Treatment Facility
I	=	Board and Care
J	=	Adult Residential Facility, Social Rehabilitation Facility, Crisis Residential, Transitional Residential, Drug Facility, Alcohol Facility
K	=	Mental Health Rehabilitation Center (24 hour)
L	=	Skilled Nursing Facility/Intermediate Care Facility/Institute of Mental Disease (IMD)
M	=	Inpatient Psychiatric Hospital, Psychiatric Health Facility (PHF), or Veterans Affairs (VA) Hospital
N	=	State Hospital
O	=	Justice related (correctional facility, jail, etc.)
P	=	Homeless, no identifiable residence
Q	=	Other

***PI_11 CONSERVATORSHIP / COURT STATUS**

Identifies whether or not the client has a conservatorship.

Source: CSI: P-08.0
 Type: Character
 Field Length: X

VALID CODES:

A	=	Temporary Conservatorship (W&I Code, Section 5353)
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Types of Permanent Conservatorship

B	=	Lanterman-Petris-Short (W&I Code, Section 5358)
C	=	Murphy (W&I Code, Section 5008)
D	=	Probate (Probate Code, Division 4, Section 1400)
E	=	PC 2974 (Penal Code, Section 2974)
F	=	Representative Payee Without Conservatorship (W&I Code, Section 5686)

G	=	<i>No conservatorship</i>
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III. MENTAL HEALTH DIAGNOSES AND STATUS OF FUNCTIONING UPON ENTRANCE INTO THE PROGRAM

*MH_1 SUICIDE RISK WHEN CLIENT FIRST ENTERED THE CORRECTIONAL FACILITY

Use the county's current suicide risk assessment procedure and identify a breakpoint that distinguishes definite suicide risk from not being a definite suicide risk.

Source: BOC
Type: Character
Field Length: X

VALID CODES:

N = No, individual does not demonstrate any significant suicide risk characteristics
Y = Yes, individual deemed a definite suicide risk

MH_2 PRIMARY MENTAL HEALTH DIAGNOSIS

Identifies the principal mental health diagnosis, which is the primary focus of attention or treatment for the mental health services. This may be any of the full range of Diagnostic and Statistical Manual (DSM) diagnoses. It may be on either Axis I or Axis II.

Source: CSI: S-09.0
Type: Character
Field Length: XXXXXXX

COMMENTS:

Please use the Diagnostic and Statistical Manual – Fourth Edition (DSM-IV).

Enter all letters and/or numbers of the DSM-IV code. Do not enter a decimal point when entering the code.

VALID CODES:

All DSM-IV codes are accepted.

MH_3 SECONDARY MENTAL HEALTH DIAGNOSIS

Identifies the secondary mental health diagnosis, which is the secondary focus of attention or treatment for the mental health services. This may be any of the full range of Diagnostic and Statistical Manual (DSM) diagnoses. It may be on either Axis I or Axis II.

Source: CSI: S-10.0
Type: Character
Field Length: XXXXXXX

COMMENTS:

Enter all letters and/or numbers of the DSM-IV code for the secondary mental health diagnosis. Do not enter a decimal point when entering the code. Enter x's in this field if the client does not have a secondary mental health diagnosis.

VALID CODES:

x = No secondary mental health diagnosis
All DSM-IV codes are accepted.

MH_4 AXIS-V / GAF

Identifies the current functioning level rating of the client.

Source: CSI: P-04.0

Type: Character

Field Length: XX

COMMENTS:

Enter '00' if the GAF score cannot be determined.

VALID CODES:

01
through = Valid numeric GAF score
99
00 = GAF score cannot be determined due to client's condition.

MH_5 OTHER FACTORS AFFECTING MENTAL HEALTH – SUBSTANCE ABUSE

Indicates if substance abuse affects the mental health of the client.

Source CSI: P-05.0

Type: Character

Field Length: X

VALID CODES:

N = No
Y = Yes

MH_6 OTHER FACTORS AFFECTING MENTAL HEALTH – DEVELOPMENTAL DISABILITIES

Indicates if developmental disabilities affect the mental health of the client.

Source: CSI: P-06.0

Type: Character

Field Length: X

VALID CODES:

N = No
Y = Yes

MH_7 OTHER FACTORS AFFECTING MENTAL HEALTH – PHYSICAL HEALTH DISORDERS

Indicates if physical health disorders affect the mental health of the client.

Source: CSI: P-07.0

Type: Character

Field Length: X

VALID CODES:

N = No
Y = Yes

IV. VARIABLES FOR DESCRIBING PARTICIPANTS' CRIMINAL JUSTICE HISTORY AND CURRENT STATUS

CJ_1 AGE AT FIRST ARREST

Source: BOC
Type: Character
Field Length: XX

VALID CODES:

The individual's age, in years, at the time of the first arrest.

CJ_2 YEAR OF FIRST ADULT CONVICTION

Source: BOC
Type: Character
Field Length: XXXX

***CJ_3a to CJ_3: PROVIDE THE FOLLOWING DATA FOR THE PERIOD OF TIME BETWEEN 25 AND 36 MONTHS AGO (BEFORE THE QUALIFYING ARREST):**

***CJ_3a NUMBER OF *CHARGES FOR WHICH INDIVIDUAL WAS BOOKED* INTO JAIL (25-36 MONTHS AGO)**

Source: BOC
Type: Character
Field Length: XX

COMMENTS:

Enter the number as a two-digit number

CJ_3b NUMBER OF CONVICTIONS

Source: BOC
Type: Character
Field Length: XX

COMMENTS:

Enter the number as a two-digit number

***CJ_3c MOST SERIOUS TYPE OF OFFENSE *CHARGED* DURING THIS PERIOD**

Source: BOC
Type: Character
Field Length: X

VALID CODES:

F = Felony
M = Misdemeanor

CJ_3d MOST SERIOUS CONVICTION DURING THIS PERIOD

Source: BOC
Type: Character
Field Length: X

VALID CODES:

- 1 = Violent offense (including homicide, forcible rape, robbery, assault, kidnapping)
- 2 = Property offense (including arrest for burglary, theft, motor vehicle theft, forgery, checks and credit card fraud, arson)
- 3 = Drug offense (possession and/or sale of narcotics, marijuana, dangerous drugs)
- 4 = All other felony offenses
- 5 = All other misdemeanor offenses
- 6 = Violation of probation

CJ_3e NUMBER OF DAYS IN JAIL

Source: BOC
Type: Character
Field Length: XXX

COMMENTS:

Enter the number as a three-digit number.

***CJ_4a to CJ_4e: PROVIDE THE FOLLOWING DATA FOR THE PERIOD OF TIME BETWEEN 13 AND 24 MONTHS AGO (BEFORE THE QUALIFYING ARREST):**

***CJ_4a NUMBER OF CHARGES FOR WHICH INDIVIDUAL WAS BOOKED INTO JAIL (13-24 MONTHS AGO)**

Source: BOC
Type: Character
Field Length: XX

COMMENTS:

Enter the number as a two-digit number

CJ_4b NUMBER OF CONVICTIONS

Source: BOC
Type: Character
Field Length: XX

COMMENTS:

Enter the number as a two-digit number

***CJ_4c MOST SERIOUS TYPE OF OFFENSE *CHARGED* DURING THIS PERIOD**

Source: BOC
Type: Character
Field Length: X

VALID CODES:

F = Felony
M = Misdemeanor

CJ_4d MOST SERIOUS CONVICTION DURING THIS PERIOD

Source: BOC
Type: Character
Field Length: X

VALID CODES:

1 = Violent offense (including homicide, forcible rape, robbery, assault, kidnapping)
2 = Property offense (including arrest for burglary, theft, motor vehicle theft, forgery, checks and credit card fraud, arson)
3 = Drug offense (possession and/or sale of narcotics, marijuana, dangerous drugs)
4 = All other felony offenses
5 = All other misdemeanor offenses
6 = Violation of probation

CJ_4e NUMBER OF DAYS IN JAIL

Source: BOC
Type: Character
Field Length: XXX

COMMENTS:

Enter the number as a three-digit number

CJ_5a to CJ_5e: PROVIDE THE FOLLOWING DATA FOR THE PERIOD OF TIME BETWEEN THE MOST RECENT ARREST (THE ARREST THAT QUALIFIED THE INDIVIDUAL FOR THE MIO PROGRAM) AND 12 MONTHS AGO:

***CJ_5a NUMBER OF *CHARGES FOR WHICH INDIVIDUAL WAS BOOKED* INTO JAIL (0-12 MONTHS AGO)**

Source: BOC
Type: Character
Field Length: XX

COMMENTS:

Enter the number as a two-digit number

CJ_5b NUMBER OF CONVICTIONS

Source: BOC
Type: Character
Field Length: XX

COMMENTS:

Enter the number as a two-digit number

***CJ_5c MOST SERIOUS TYPE OF OFFENSE *CHARGED* DURING THIS PERIOD**

Source: BOC
Type: Character
Field Length: X

VALID CODES:

F = Felony
M = Misdemeanor

CJ_5d MOST SERIOUS CONVICTION DURING THIS PERIOD

Source: BOC
Type: Character
Field Length: X

VALID CODES:

1 = Violent offense (including homicide, forcible rape, robbery, assault, kidnapping)
2 = Property offense (including arrest for burglary, theft, motor vehicle theft, forgery, checks and credit card fraud, arson)
3 = Drug offense (possession and/or sale of narcotics, marijuana, dangerous drugs)
4 = All other felony offenses
5 = All other misdemeanor offenses
6 = Violation of probation

CJ_5e NUMBER OF DAYS IN JAIL

Source: BOC
Type: Character
Field Length: XXX

COMMENTS:

Enter the number as a three-digit number

CJ_6a to CJ_6d PROVIDE THE FOLLOWING DATA WITH REGARD TO THE ARREST OR INCARCERATION THAT QUALIFIED THE INDIVIDUAL FOR THE MIO PROGRAM

CJ_6a TYPE OF OFFENSE *CHARGED

Source: BOC
Type: Character
Field Length: X

VALID CODES:

F = Felony
M = Misdemeanor

CJ_6b MOST SERIOUS *CONVICTION* THAT QUALIFIED INDIVIDUAL

Source: BOC
Type: Character
Field Length: X

VALID CODES:

- | | | |
|---|---|--|
| 1 | = | Violent offense (including homicide, forcible rape, robbery, assault, kidnapping) |
| 2 | = | Property offense (including arrest for burglary, theft, motor vehicle theft, forgery, checks and credit card fraud, arson) |
| 3 | = | Drug offense (possession and/or sale of narcotics, marijuana, dangerous drugs) |
| 4 | = | All other felony offenses |
| 5 | = | All other misdemeanor offenses |
| 6 | = | Violation of probation |

***CJ_6c NUMBER OF DAYS IN JAIL FOR QUALIFYING ARREST**

Source: BOC
 Type: Character
 Field Length: XXX

COMMENTS:

Enter the number as a three-digit number

***CJ_6d CLIENT RECEIVED/WILL RECEIVE PROBATION FOLLOWING INCARCERATION FOR THE QUALIFYING ARREST?**

Source: BOC
 Type: Character
 Field Length: X

VALID CODES:

N	=	No
Y	=	Yes
U	=	Uncertain

V. VARIABLES FOR DESCRIBING THE CLIENT'S CURRENT RESOURCES

**This information should reflect the client's status prior to the qualifying arrest.*

***CR_1a to CR_1e ASSESS THE ADEQUACY OF INCOME DURING THE 30 DAYS PRIOR TO THE QUALIFYING ARREST FOR MEETING THE CLIENT'S ... (see below):**

CR_1a BASIC FOOD NEEDS

Source: QOL 13a
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

CR_1b BASIC CLOTHING NEEDS

Source: QOL 13b
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

CR_1c BASIC HOUSING NEEDS

Source: QOL 13c
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

CR_1d BASIC TRANSPORTATION NEEDS

Source: QOL 13d
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

CR_1e BASIC SOCIAL NEEDS

Source: QOL 13e
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

CR_2 EMPLOYMENT UPON RELEASE

Source: BOC
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

***CR_3a to CR_3i RELATE TO WHETHER THE CLIENT RECEIVED ANY OF THE FOLLOWING FORMS OF ASSISTANCE IN THE 12 MONTHS (PRIOR TO THE ARREST THAT QUALIFIED THE CLIENT FOR THE MIO PROGRAM) SOME OF THESE ITEMS APPEAR ON THE ASI**

CR_3a UNEMPLOYMENT COMPENSATION

Source: BOC
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

CR_3b CALWORKS

Source: BOC
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

***CR_3c DPA (GENERAL PUBLIC ASSISTANCE)**

Source: BOC
Type: Character
Field Length: X

VALID CODES:

N = Yes
Y = No

CR_3d VETERANS' ADMINISTRATION SUPPORT

Source: BOC
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

CR_3e SOCIAL SECURITY INCOME (SSI)

Source: BOC
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

CR_3f SOCIAL SECURITY DISABILITY INCOME (SSDI)

Source: BOC
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

CR_3g PENSION BENEFITS

Source: BOC
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

CR_3h FAMILY OR FRIENDS

Source: BOC
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

CR_3i OTHER

Source: BOC
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

CR_4 CLIENT WAS RECEIVING PUBLIC SUPPORT AT THE TIME OF ENTRY INTO THE PROGRAM.

Source: BOC
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

CR_5 PERCEIVED FAMILY SUPPORT

Client's feelings about how things are going, in general, between self and family.

Source: California QOL 6B or Lehman QOL 9
Type: Character
Field Length: XX

VALID CODES:

= Score from CQOL 6B or Lehman 9

CR_6 PROBLEMS WITH ALCOHOL REPORTED

Source: BASIS 32, ASI
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

COMMENTS:

Use score from BASIS 32, ASI, or other assessment instrument to determine appropriate response.

CR_7 PROBLEMS WITH DRUGS REPORTED

Source: BASIS 32, ASI
Type: Character
Field Length: X

VALID CODES:

N = No
Y = Yes

COMMENTS:

Use score from BASIS 32, ASI, or other assessment instrument to determine appropriate response.

PROGRAM PARTICIPATION INFORMATION

*PP_1 PROGRAM ENTRY DATE

Source: BOC
Type: Date
Field Length: mm/dd/yyyy

COMMENTS:

Date on which some type of activities were started on behalf of the client. Could include pre-release planning, contacting resources, etc., and doesn't require contact with the individual..

*PP_2 DATE CLIENT LEFT IN-CUSTODY TREATMENT PROGRAM

Source: BOC
Type: Date
Field Length: mm/dd/yyyy

VALID CODES:

Enter date in format described.
1/1/2011 Not applicable

PP_3 CLIENTS STATUS REGARDING LEAVING IN-CUSTODY PROGRAM

At the time that the client left the in-custody program, the client had:

Source: BOC
Type: Character
Field Length: X

VALID CODES:

- 1 = Completed all components of the program
- Did not complete program for one of the following reasons:**
- 2 = Entered special program (e.g., psychiatric hospital)
- 3 = Illness or death
- 4 = Removal from program by caretaker
- 5 = Removal from program by court
- 6 = Committed to state prison
- 7 = Persisted in unacceptable behavior
- 8 = Chose to leave the program
- 9 = Other

*PP_4 DATE CLIENT ENTERED POST-CUSTODY TREATMENT

Source: BOC
Type: Date
Field Length: mm/dd/yyyy

VALID CODES:

Enter date in format described.
1/1/2011 Not applicable

COMMENTS:

Date individual began to participate in the post-custody component of the program, irrespective of earlier involvement in in-custody components.

***PP_5 DATE CLIENT LEFT POST-CUSTODY TREATMENT PROGRAM**

Source: BOC
Type: Date
Field Length: mm/dd/yyyy
VALID CODES:
Enter date in format described
1/1/2011 *Not applicable*

PP_6 CLIENTS STATUS REGARDING LEAVING POST-CUSTODY PROGRAM

Source: BOC
Type: Character
Field Length: XX

VALID CODES:

- 1 = Completed all components of the program
- Did not complete program for one of the following reasons:***
- 2 = Entered special program (e.g., psychiatric hospital)
- 3 = Illness or death
- 4 = Removal from program by caretaker
- 5 = Removal from program by court
- 6 = Committed to state prison
- 7 = Persisted in unacceptable behavior
- 8 = Chose to leave the program
- 9 = New offense
- 10 = New incarceration
- 11 = Other

***PP_7 DATE OF COLLECTION OF POST-PROGRAM FINAL FOLLOW-UP DATA**

Source: BOC
Type: Date
Field Length: mm/dd/yyyy
VALID CODES:
Enter date in format described
1/1/2011 *Not applicable.*

COMMENTS:

Final data collection date for this individual. For programs that don't have completion criteria, this could be the last date of contact.

Part II
Intervention Common Data Elements Dictionary
Mentally Ill Offender Crime Reduction Grant

Friday, July 28, 2000

Part II - Intervention Common Data Elements Dictionary

Mentally Ill Offender Crime Reduction Grant

Instructions: In six-month intervals, a data file identifying all interventions received by MIOCRG participants (whether treatment-as-usual or alternative-treatment) is due at the Board of Corrections. This data dictionary describes the fields and coding schemes. A SPSS data file has been provided that corresponds to this data dictionary.

When determining which data element to use in reporting services, please use the following decision tree:

1. Was the service received while in custody (pages 5 through 15) or
2. after release (pages 15 through 28)?
3. What was the nature of the service? Don't be concerned about the affiliation or training of the service provider, our focus is on the type of service.
4. Does your county report this service separately or does it aggregate this service with other services and report at the more general level? Please use the most detailed reporting categories possible.

When reporting the amount of time a participant received an intervention, report only the actual service delivery time. Please do not include travel or charting time. If the county doesn't break out travel and charting time from service provision time, please determine the proportion of time generally used for travel or charting and subtract it from the time reported by the county. In this way, we can more accurately compare the intensity of services on outcome behavior across counties that vary widely in geography and population density.

Default Codes

For consistency, please use these conventions for all data elements:

- 0 use only when the correct response is the number zero.
- 3 use when the data element is not applicable to the particular project or client (e.g., use this code for the post-custody interventions field for programs that offer interventions only in the jail).
- *1/1/11 use in the date fields when the data element is not applicable to the particular project or client
- 2 use when the client is unable to respond to question.
- 1 use when the expected information is missing.

In all numeric fields, the system missing data values have been set to -3 and -2 in the data definition.

Please do not leave any fields empty or blank.

Key

For all interventions, use the following key:

Y/N = Yes/No, the service was provided

M = Count of minutes services were provided during reporting period

HD = Count of half-days during which client received service

C = Count of contacts (sufficiently long for meaningful interaction or support). (In the future, we may need to define what constitutes a contact.

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67	VSO	Special vocation services	24
68	CEO	Contact potential employers on clients' behalf	25
69	EDO	Meet with client to develop and achieve education goals	25
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I. INTERVENTIONS PROVIDED WHILE PARTICIPANT IS IN CUSTODY

The first six data elements (OCMC through OFAC) are to be used only by counties that can separately report receipt of case management, brokerage, medical, dental, housing, and accessing financial support services.

1 OCMC

Case Management services, only – activities that assist a client to access medical, educational, social, prevocational, vocational, rehabilitative, or other needed service.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

This field reflects only general case management services. Counties that cannot distinguish case management from brokerage services should use #7, CMBC to record services received.

2 OBC

Brokerage only – activities that assist a client to access medical, educational, social, prevocational, vocational, rehabilitative, or other needed service.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

This field reflects general brokerage services. Again, counties that cannot separate case management from brokerage services, use #7, CMBC.

3 OMSC

Help clients access medical services.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XX

VALID CODES:

1 = Yes, client received this service
2 = No, client did not receive this service

COMMENTS:

This data element is to be used only by those counties that can separately document receipt of help accessing medical services. For counties that cannot separate that service, please use #7, CMBC

4 ODSC

Help clients access dental services.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XX

VALID CODES:

1 = Yes, client received this service
2 = No, client did not receive this service

COMMENTS:

This data element is to be used only by those counties that can separately document receipt of help accessing dental services. For counties that cannot separate that service, please use #7, CMBC

5 OHC

Help clients find housing.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XX

VALID CODES:

1 = Yes, client received service
2 = No, client did not receive this service

COMMENTS:

This data element is to be used only by those counties that can separately document receipt of help accessing housing. For counties that cannot separate that service, please use #7, CMBC

6 OFAC

Help clients access financial assistance.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XX

VALID CODES:

1 = Yes, client received service
2 = No, client did not receive service

COMMENTS:

This data element is to be used only by those counties that can separately document receipt of help accessing housing. For counties that cannot separate that service, please use #7, CMBC

7 CMBC

Case Management and Brokerage (with or without client or collateral contact) – activities that assist a client to access medical, educational, social, prevocational, vocational, rehabilitative , or other needed service.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

Includes all services generally provided through case management or brokerage, including (but not limited to) medical and dental services, housing, conservatorship, vocational assistance, drug treatment services, or entitlements. May also include involving collateral parties, although neither the client nor the collateral need be present for a service to be provided and counted.

8 ASSTC

Assessment – clinical analysis of the history and current status of client’s mental, emotional, or behavioral disorder.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

May include, but not be limited to, assessment or psychological testing of client, scoring or reporting on results in or out of client’s presence, performing “functional analyses” of clients criminal behavior

9 PDC

Plan Development – development of coordination plans, treatment plans or service plans, approval plans, verification of medical necessity, monitoring of client’s progress.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

May include, but not be limited to, developing a pre-disposition plan, a treatment plan for in-custody time, developing plan for post-release care, consult for coordination of services, case planning, treatment planning, case conferencing, utilizing client’s criminal activity history to develop plan, developing results-driven plans, or writing a transition plan.

10 PREPC

Prepare MIO to participate in post-release program.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of contacts between client and provider for the relevant six-month reporting period.

COMMENTS:

Brief clients on program services, written transition plan developed with mental health and probation staff, includes education and vocation goals, and engagement phase in jail, develop trust, identify goals and needs

11 EVC

Evaluation – appraisal of the individual’s community functioning in several areas including living situation, daily activities, social support systems, and health status.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

Includes administering state-mandated instruments (e.g., BASIS 32)

12 COLLC

Collateral – includes working with families, consulting on behalf of the client.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

May include working with other support persons

13 DSC

Developing support system for the client.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

14 MSSC

Medication support services - Medication support services – prescribing, dispensing and monitoring psychiatric medications or biologicals to alleviate symptoms of mental illness.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

15 SJHC

Special jail housing – does not provide intensive treatment, but may provide substance abuse support.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of days client received these services for the relevant six-month reporting period.

COMMENTS:

16 JIC

Jail Inpatient – a distinct unit within an adult detention facility which is staffed to provide intensive psychological treatment to inmates.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of days client received these services for the relevant six-month reporting period.

COMMENTS:

May include substance abuse jail housing

17 HIC

Hospital Inpatient – Hospital Inpatient – services provided in acute psych hospital or unit within general hospital.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of days client received these services for the relevant six-month reporting period.

COMMENTS:

May include substance abuse residential treatment

18 SCWC

Safety cell suicide watch evaluations.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

19 CIC

Crisis Intervention – service lasting less than 24 hours, for condition which requires more timely response than a regularly scheduled visit.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

20 CSC

Crisis stabilization – includes services provided in the emergency room or in urgent care for less than 24 hours.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of hours the client received these services for the relevant six-month reporting period.

COMMENTS:

21 JCOC

Jail Counseling (outpatient) – services within jail, not necessarily within a distinct unit. Staffed to provide psychological assessments and medication support.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of hours the client received these services for the relevant six-month reporting period.

COMMENTS:

For counties that cannot separately identify individual and group counseling. May include individual counseling while in custody or substance abuse counseling while in custody

22

ICC

Individual counseling while in custody.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

23

GCC

Group counseling while in custody.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

24

SACC

Substance abuse counseling while in custody.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

25

IMHSC

Individual mental health services

Therapy – Interventions consistent with the individual’s goals/desired roles/personal milestones

Rehabilitation

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

In general, refers to mental health services provided on an individual basis that helps a client reach his/her goals.

For some counties, will also include assessment, testing, evaluation, group counseling, vocational counseling, help meeting educational goals, developing leisure activities, life skills, social skills, and independent living skills, providing support while client is hospitalized, be continuously available to provide support to client, involve collateral parties, and consulting for the coordination of services.

26 POC

Contact with probation officer.

Source: County records
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of contacts between client and probation officer for the relevant six-month reporting period.

COMMENTS:

Includes any meaningful contact between client and PO.

27 MHCC

Program staff's contact with court or legal personnel on behalf of the client.

Source: County records
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of contacts between client and probation officer for the relevant six-month reporting period.

COMMENTS:

Includes mental health court, pre-adjudication planning, and court liaison activities.

28 VSC

Vocation services – facilitates individual motivation and focus upon realistic and attainable vocational goals. Can include job skill development and linking clients to vocational services.

Source: County records
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of half-days client receives this service during the relevant six-month reporting period.

COMMENTS:

29 SVSC

Special vocation services – horticulture program and job placement service.

Source: County records
Type: Numeric
Field Length: XXXX

VALID CODES:

1 = Yes
2 = No

COMMENTS:

Includes special, program-specific, vocational skills development program such as the horticulture program in Santa Barbara.

30 CEC

Contact potential employers on clients' behalf.

Source: County records
Type: Numeric
Field Length: XXXX

VALID CODES:

1 = Yes
2 = No

COMMENTS:

31 EDC

Meet with client to develop and achieve education goals – includes strongly encouraging and providing referrals or links to educational/vocational resources.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

1 = Yes
2 = No

COMMENTS:

Includes strongly encouraging and providing referrals or links to educational/vocational resources

32 EAC

Advocate with educational agency to gain access for client.

Source: County records, medi-cal billing data, CSI database
Type: Numeric

Field Length: XXXX

VALID CODES:

1 = Yes
2 = No

COMMENTS:

33

PMC

Peer mentoring.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

1 = Yes
2 = No

COMMENTS:

34

PSC

Attendance at peer support group meetings.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

Does not require that attendance be voluntary. Includes mandatory as well as “encouraged” and “referred to” attendance at 12 step, self-help, and other client-run programs that address drug or alcohol abuse.

II. INTERVENTIONS PROVIDED WHILE PARTICIPANT IS OUT OF CUSTODY

The first six data elements (OCMO through OFAO) are to be used only by counties that can separately report receipt of case management, brokerage, medical, dental, and housing services.

35

OCMO

Case Management services, only – activities that assist a client to access medical, educational, social, prevocational, vocational, rehabilitative, or other needed service.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

This field reflects only general case management services. Counties that cannot distinguish case management from brokerage services should use *** to record services received.

36

OBO

Brokerage only – activities that assist a client to access medical, educational, social, prevocational, vocational, rehabilitative, or other needed service.

Source: County records, medi-cal billing data, CSI database
 Type: Numeric
 Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

This field reflects general brokerage services. Again, counties that cannot separate case management from brokerage services, use ***.

37

OMSO

Help clients access medical services.

Source: County records, medi-cal billing data, CSI database
 Type: Numeric
 Field Length: XX

VALID CODES:

1 = Yes, client received this service
 2 = No, client did not receive this service

COMMENTS:

This data element is to be used only by those counties that can separately document receipt of help accessing medical services. For counties that cannot separate that service, please use ***

38

ODSO

Help clients access dental services.

Source: County records, medi-cal billing data, CSI database
 Type: Numeric
 Field Length: XX

VALID CODES:

1 = Yes, client received this service
 2 = No, client did not receive this service

COMMENTS:

This data element is to be used only by those counties that can separately document receipt of help accessing dental services. For counties that cannot separate that service, please use ***

39

OHO

Help clients find housing.

Source: County records, medi-cal billing data, CSI database
 Type: Numeric

Field Length: XX

VALID CODES:

1 = Yes, client received service
2 = No, client did not receive this service

COMMENTS:

This data element is to be used only by those counties that can separately document receipt of help accessing housing. For counties that cannot separate that service, please use ***

40 OFAO

Help clients access financial assistance.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XX

VALID CODES:

1 = Yes, client received service
2 = No, client did not receive service

COMMENTS:

This data element is to be used only by those counties that can separately document receipt of help accessing housing. For counties that cannot separate that service, please use ***

41 CMBO

Case Management and Brokerage (with or without client or collateral contact) – activities that assist a client to access medical, educational, social, prevocational, vocational, rehabilitative , or other needed service.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

Includes all services generally provided through case management or brokerage, including (but not limited to) medical and dental services, housing, conservatorship, vocational assistance, drug treatment services, or entitlements. May also include involving collateral parties, although neither the client nor the collateral need be present for a service to be provided and counted.

42 ASSTO

Assessment – clinical analysis of the history and current status of client's mental, emotional, or behavioral disorder.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

May include, but not be limited to, assessment or psychological testing of client, scoring or reporting on results in or out of client's presence, performing "functional analyses" of clients criminal behavior

43 PDO

Plan Development – development of coordination plans, treatment plans or service plans, approval plans, verification of medical necessity, monitoring of client's progress.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

May include, but not be limited to, consulting for the coordination of services, case planning, treatment planning, and case conferencing, utilizing the clients' criminal history to develop plan, and developing results-oriented case plans,

44 EVO

Evaluation – appraisal of the individual's community functioning in several areas including living situation, daily activities, social support systems, and health status.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

Includes administering state-mandated instruments (e.g., BASIS 32)

45 COLLO

Collateral – includes working with families, consulting on behalf of the client.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

May include working with other support persons

46 DSO

Developing support system for the client.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

47 MSSO

Medication support services - Medication support services – prescribing, dispensing and monitoring psychiatric medications or biologicals to alleviate symptoms of mental illness.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

48 ICO

Individual counseling after release.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

49 GCO

Group counseling after release.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

50

SACO

Substance abuse counseling after release.

Source: County records, medi-cal billing data, CSI database
 Type: Numeric
 Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

51

IMHSO

Individual mental health services

Therapy – Interventions consistent with the individual’s goals/desired roles/personal milestones

Rehabilitation

Source: County records, medi-cal billing data, CSI database
 Type: Numeric
 Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

In general, refers to mental health services provided on an individual basis that helps a client reach his/her goals.

For some counties, will also include assessment, testing, test scoring and reporting, evaluation, individual counseling, group counseling, substance abuse counseling, vocational counseling, help meeting educational goals, developing leisure activities, life skills, social skills, and independent living skills, providing support while client is hospitalized, be continuously available to provide support to client, involve collateral parties, and consulting for the coordination of services.

52

POO

Contact with probation officer.

Source: County records
 Type: Numeric
 Field Length: XXXX

VALID CODES:

Enter the number of contacts between client and probation officer for the relevant six-month reporting period.

COMMENTS:

Includes any meaningful contact between client and PO.

53

MHCO

Program staff’s contact with court or legal personnel on behalf of the client.

Source: County records
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of contacts between client and probation officer for the relevant six-month reporting period.

COMMENTS:

Includes mental health court, pre-adjudication planning, and court liaison activities.

54 HIO

Hospital Inpatient – services provided in acute psych hospital or unit within general hospital.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of days client received these services for the relevant six-month reporting period.

COMMENTS:

May include substance abuse residential treatment

55 CIO

Crisis Intervention – service lasting less than 24 hours, for condition which requires more timely response than a regularly scheduled visit.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

56 CSO

Crisis stabilization – includes services provided in the emergency room or in urgent care for less than 24 hours.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of hours the client received these services for the relevant six-month reporting period.

COMMENTS:

57

PHFO

Psych Health Facility – therapeutic and/or rehab services in non-hospital 24-hour inpatient.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of days client received these services for the relevant six-month reporting period.

COMMENTS:

58

SNFO

SNF Intensive – licensed skilled nursing facility staffed to provide intensive psych services.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of days client received these services for the relevant six-month reporting period.

COMMENTS:

59

IMDO

IMD – 24 hour psych care in a facility where more than 50% of the patients have mental disorders.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of days client received these services for the relevant six-month reporting period.

COMMENTS:

60

PHO

Provide housing.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

1 = Yes
2 = No

COMMENTS:

Includes temporary housing (e.g., SROs, hotels), or provision of Section 8 housing vouchers. Does not include residential treatment facilities.

61 UHO

Used housing provided by the program.

Source: County records, medi-cal billing data, CSI database

Type: Numeric

Field Length: XXXX

VALID CODES:

Enter the number of days client received these services for the relevant six-month reporting period.

COMMENTS:

62 ARO

Adult residential – rehab services, non-institutional residential setting (can include board and care homes), provides therapeutic community with range of services to help individual avoid hospital. Includes semi-supervised and independent living support.

Source: County records, medi-cal billing data, CSI database

Type: Numeric

Field Length: XXXX

VALID CODES:

Enter the number of days client received these services for the relevant six-month reporting period.

COMMENTS:

Can include substance abuse residential treatment if it can't be separated from other types of residential treatment facilities

63 SARO

Substance abuse residential treatment.

Source: County records, medi-cal billing data, CSI database

Type: Numeric

Field Length: XXXX

VALID CODES:

Enter the number of days client received these services for the relevant six-month reporting period.

COMMENTS:

64 PSRCO

Psychosocial rehab center – 24 hour program to provide intensive support and rehab services to develop skills for self-sufficiency and higher level of independent living.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of half-days client received these services for the relevant six-month reporting period.

COMMENTS:

65 VSO

Vocation services – facilitates individual motivation and focus upon realistic and attainable vocational goals. Can include job skill development and linking clients to vocational services.

Source: County records
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of half-days client receives this service during the relevant six-month reporting period.

COMMENTS:

66 JCC

Job coaches.

Source: County records
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of contacts between client and job coach during relevant six-month period.

COMMENTS:

Includes any meaningful contact.

67 VSO

Special vocation services – horticulture program and job placement service.

Source: County records
Type: Numeric
Field Length: XXXX

VALID CODES:

1 = Yes
2 = No

COMMENTS:

Includes special, program-specific, vocational skills development program such as the horticulture program in Santa Barbara.

- 68 CEO**
Contact potential employers on clients' behalf.

Source: County records
Type: Numeric
Field Length: XXXX

VALID CODES:

1 = Yes
2 = No

COMMENTS:

- 69 EDO**
Meet with client to develop and achieve education goals – includes strongly encouraging and providing referrals or links to educational/vocational resources.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

1 = Yes
2 = No

COMMENTS:

Includes strongly encouraging and providing referrals or links to educational/vocational resources

- 70 EAO**
Advocate with educational agency to gain access for client.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

1 = Yes
2 = No

COMMENTS:

- 71 SO**
Socialization – provides activities for clients who require structured support and an opportunity to develop skills for independent living.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of half-days client received service during relevant six-month period.

COMMENTS:

Can include life skills development, developing leisure time activities, social skills development, and facilitating participation in group activities, on and off-site.

72 DCT

Day treatment intensive – organized and structured multi-disciplinary treatment program as alternative to hospitalization and to maintain client in a community setting. Helps clients develop social skills.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of half-days client received service during relevant six-month period.

COMMENTS:

73 PMO

Peer mentoring.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

1 = Yes
2 = No

COMMENTS:

74 EDO

Attendance at peer support group meetings.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of whole minutes the client received these services for the relevant six-month reporting period.

COMMENTS:

Does not require that attendance be voluntary. Includes mandatory as well as “encouraged” and “referred to” attendance at 12 step, self-help, and other client-run programs that address drug or alcohol abuse.

75 PTO

Provide transportation.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

1 = Yes
2 = No

COMMENTS:

76 PTCO

Frequency transportation was provided.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of times the client received these services for the relevant six-month reporting period.

COMMENTS:

77 SATO

Substance abuse testing.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of times the client was tested for substance use

COMMENTS:

Includes mandatory or voluntary, weekly or random testing and when used as a therapeutic tool.

78 EMO

Electronic monitoring.

Source: County records, medi-cal billing data, CSI database
Type: Numeric
Field Length: XXXX

VALID CODES:

Enter the number of days in which the client received these services for the relevant six-month reporting period.

COMMENTS:

